

SEMINOLE COUNTY GOVERNMENT AGENDA MEMORANDUM

SUBJECT: Certificate of Public Convenience and Necessity

DEPARTMENT: Environmental Services

DIVISION: Solid Waste Management

AUTHORIZED BY: John Cirello

CONTACT: William (Johnny) Edwards

EXT: 2022

MOTION/RECOMMENDATION:

Approve and authorize the Chairman to execute Certificate of Public Convenience and Necessity for Keller Outdoor, Inc.

County-wide

William (Johnny) Edwards

BACKGROUND:

Chapter 235 of the Seminole County Code authorizes the Board to regulate the collection and disposal of waste in the unincorporated county. The above company has complied with the requirements as set forth in the Seminole County Code and has requested a Certificate of Public Convenience and Necessity (COPCN) from Seminole County to perform commercial collection services of waste in the unincorporated areas of Seminole County. This firm has provided an application that indicates that they only provide Construction and Demolition (C&D) Debris collection services, Special Waste collection services, or Recyclables collection services. Staff has verified this information through follow up investigation. This firm has provided insurance information that complies with the recent amendments to Chapter 235 of the Seminole County Code.

Firms that collect only C&D Debris, Special Wastes, or Recyclables are not required to obtain a non-exclusive commercial solid waste collection franchise. These firms are required to obtain COPCNs.

STAFF RECOMMENDATION:

Staff recommends that the Chairman execute the Certificate of Public Convenience and Necessity for Keller Outdoor, Inc.

ATTACHMENTS:

1. COPCN Application

Additionally Reviewed By:

☒ County Attorney Review (Susan Dietrich)

ENVIRONMENTAL SERVICES DEPARTMENT

SOLID WASTE MANAGEMENT DIVISION



LET IT BE KNOWN, that the holder of this Certificate of Public Convenience and Necessity ("the Holder") has read and agreed to comply with the requirements and standards of service set forth in Seminole County Code Chapter 235, and all other local, state and federal regulations that apply to the proper collection and disposal of waste. The Holder has acknowledged that failure to comply with any or all of the standards or requirements set forth in Seminole County Code Chapter 235 will result in termination of this Certificate of Public Convenience and Necessity.

Company Name: Keller Outdoor, Inc.

Street Address: 2150 Marquette Avenue

City, State & Zip: Sanford, Florida 32773

Type of Operation: Collection Services: Construction & Demolition Debris

This Certificate of Public Convenience and Necessity is valid from October 1, 2008 through September 30, 2009, unless earlier terminated as provided hereinabove, and is applicable to Commercial Collection Service in the unincorporated County only.

ATTEST:

Board of County Commissioners
Seminole County, Florida

Maryanne Morse

By: _____

Clerk to the Board of
County Commissioners of
Seminole County, Florida

Date: _____

For the use and reliance
of Seminole County only,
approved as to form and
legal sufficiency

As authorized for execution by the
Board of County Commissioners
at their _____, 20 _____,
regular meeting.

County Attorney

Seminole County
Certificate of Public Convenience and Necessity
COMPANY INFORMATION

Seminole County Code, Section 235.51 requires firms that collect waste, operate a landfill, disposal facility, recycling facility, or incinerator to possess a COPCN issued by the Board of County Commissioners. The COPCN is **valid from October 1, 2008 through September 30, 2009.**

Please complete all application items enclosed and return with a check to cover the \$100.00 application fee and \$20.00 for each vehicle identified on the Vehicle Identification List form included. Make checks payable to Seminole County BCC-COPCN and mail to Carol Norwood, Solid Waste Management Division, 1950 State Road 419, Longwood, Florida 32750. Firms not meeting these requirements will no longer be authorized to work in Seminole County. If you have any questions, please contact Carol Norwood at 407-665-2257.

Date: 8/15/08

Company Name: Keller Outdoor, Inc.
(Ensure corporate name matches name filed with Florida Department of State, Division of Corporations)

Mailing Address: 2150 Marquette Ave.

City: Sanford State: FL Zip: 32773

Site
Street Address: _____

City: _____ State: _____ Zip: _____

Contact Person: Ruth Johnson Phone: 407-330-2750 FAX: 407-330-1527

Email Address: RJOHNSON@KellerOutdoorFLA.COM

Owner/Stockholders/5% or more: Bobby Keller
Richard Keller

List Prior Companies & Forms of Business: None

Person responsible for quarterly reports: <u>Ruth Johnson</u> Phone: <u>407-330-2750</u>
Email Address: <u>RJOHNSON@KellerOutdoorFLA.COM</u>

Statement of Capability and Financial Responsibility

I certify that Keller Outdoor, Inc. is capable of performing the service(s) applied for and is Financially Responsible.

Bobby S. Keller
Signature

8/15/08
Date

Bobby S. Keller
Print Name above

Seminole County
Certificate of Public Convenience and Necessity
TYPE OF OPERATION

Does your company collect waste in unincorporated
Seminole County?
If yes, please complete information below.

COLLECTION SERVICES:

Materials Collected

SOLID WASTE:

- Furniture _____
- Garbage _____
- Rubbish _____
- Sludge _____

CONSTRUCTION & DEMOLITION DEBRIS:

- Concrete, brick and fines ☒
- Wood ☒
- Land Clearing Debris ☒
- Asphalt ☒
- Drywall ☒
- Roofing Shingles ☒

RECYCLABLE MATERIALS:

- Newspaper _____
- Glass _____
- Aluminum Cans _____
- Plastic Bottles _____
- Steel Cans _____
- Other Plastics _____
- Ferrous Metals _____
- Non-Ferrous Metals _____
- Corrugated Cardboard _____
- Office Paper _____
- Food Waste _____
- Textiles _____
- Other (specify) _____

SPECIAL WASTE

- Yard Trash _____
- White Goods _____
- Tires _____
- Other (specify) _____

HAZARDOUS WASTE:

- Biological Waste _____
- Biohazardous Waste _____
- Other (specify) _____

Does your company operate a waste management facility
in unincorporated Seminole County?
If yes, please complete information below.

FACILITY:

Address: _____

City _____ Zip _____

- Equipment Parking and / or _____
- Maintenance Yard Only. _____

RECYCLING FACILITY:

- C&D Processing _____
- Materials Recovery _____
- Yard Waste/Tree Debris _____
- Disposal Facility, Specify _____

!

Materials handled at facility (list all)

_____	_____
_____	_____
_____	_____
_____	_____

Tons handled annually (per material, if applicable)

Item Tons per year

_____	_____
_____	_____
_____	_____

Where do you deliver materials for disposal and / or processing?

NOTE:

* Include Copies Of All Pertinent
Regulatory Agency Operation Permits.
Attach additional pages as needed.

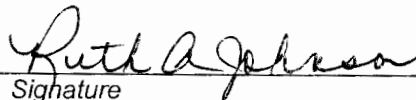
Seminole County
Certificate of Public Convenience and Necessity
COMPLIANCE AGREEMENT

NAME OF COMPANY: Keller Outdoor, Inc.

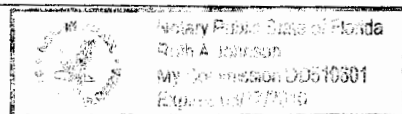
I/We have received and read Chapter 235 of the Seminole County Code. I/We fully understand that I/We must abide by and incorporate the requirements and standards of service set forth in this chapter in each agreement to provide service in Seminole County. I/We understand that failure to comply with any or all of the standards or requirements set forth in Chapter 235 of the Seminole County Code will result in termination of the Certificate of Public Convenience and Necessity.

Owner:  Date: 8/15/08
Signature

Print Name Bobby S. Keller Date: 8/15/08

Notary  Date: 8/15/08
Signature

Print Name Ruth A. Johnson Date: 8/15/08



Seminole County
Certificate of Public Convenience and Necessity
VEHICLE IDENTIFICATION LIST

Please complete this form and include payment to cover the \$20.00 per vehicle fee.

Seminole County will issue a decal for each vehicle listed below.

- The decal will be issued upon COPCN approval and is to be displayed on the driver's side of the vehicle.

Company Name: Keller Outdoor, Inc.

YEAR	MAKE	MODEL	TYPE (roll-off, etc.)	TAG NUMBER	FLEET ID NUMBER	DECAL NUMBER For County Use Only
05	MAK	CV713	Roll-off	N48 79I	51	
05	FORD	F-550	Roll-off	C21 4LD	52	
06	MAK	CV713	Roll-off	N64 04J	58	
06	MAK	CV713	Roll-off	N76 44I	56	
05	MAK	CV713	Roll-off	N48 78I	50	

Total number of vehicles: 5
X 20.00 per vehicle 20.00
Sum: 100.00

Make copies as necessary

Seminole County
Certificate of Public Convenience and Necessity
AFFIDAVIT OF CORPORATE IDENTITY / AUTHORITY

STATE OF Florida
COUNTY OF Seminole

COMES NOW, Bobby S. Keller, being first duly sworn, who deposes and says:

- (1) That he/she is the President, an officer
of Keller Outdoor, Inc corporation existing under
the laws of the State of Florida;
- (2) That he/she is authorized to execute the Certificate Of Public Convenience And Necessity
Application on behalf of the above named corporation; and
- (3) That this Affidavit is made to induce Seminole County to issue a Certificate of Public Convenience
and Necessity for solid waste commercial collection services to the above-named corporation.

FURTHER AFFIANT SAYETH NAUGHT

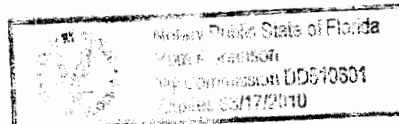
Bobby S. Keller, Affiant

The following Affidavit was signed, acknowledged and sworn to by Bobby S. Keller

_____ before me this 15th day of August, 20 08

Ruth A. Johnson
Notary Public, State of Florida

My commission expires: 3/17/2010



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS					
Home	Contact Us	E-Filing Services	Document Searches	Forms	H
Previous on List Next on List Return To List					
Events		No Name History		<input type="text" value="Entity Name:"/>	
<u>Detail by Entity Name</u>					
<u>Florida Profit Corporation</u>					
KELLER OUTDOOR, INC.					
<u>Filing Information</u>					
Document Number	K56177				
FEI Number	592921206				
Date Filed	12/28/1988				
State	FL				
Status	ACTIVE				
Last Event	REINSTATEMENT				
Event Date Filed	10/19/1999				
Event Effective Date	NONE				
<u>Principal Address</u>					
2150 MARQUETTE AVE SANFORD FL 32773 Changed 07/21/2008					
<u>Mailing Address</u>					
1221 INDIANA AVENUE WITNER PARK FL 32789 Changed 01/08/2008					
<u>Registered Agent Name & Address</u>					
KELLER, BOBBY S. 171 S PHELPS AVE WINTER PARK FL 32789 US Address Changed: 01/17/2007					
<u>Officer/Director Detail</u>					
<u>Name & Address</u>					
Title PD KELLER, BOBBY S 171 S PHELPS AVE WINTER PARK FL 32789					

ACORD™ CERTIFICATE OF LIABILITY INSURANCE		OP ID MY KELLE-1	DATE (MM/DD/YYYY) 10/17/08
PRODUCER Brown & Brown of Florida, Inc. 2600 Lake Lucien Dr., Ste. 330 Maitland FL 32751-7234 Phone: 407-660-8282 Fax: 407-660-2012		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED Keller Outdoor, Inc. 2150 Marquette Avenue Sanford FL 32773		INSURERS AFFORDING COVERAGE INSURER A: Amerisure Companies INSURER B: INSURER C: INSURER D: INSURER E:	NAIC # 19488

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.						
INSR	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Contractual GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	GL2031839	09/09/08	09/09/09	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	CA 2031837	09/09/08	09/09/09	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
A		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$	CU 2031840 02	09/09/08	09/09/09	EACH OCCURRENCE \$ 7,000,000 AGGREGATE \$ 7,000,000 \$ \$ \$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	WC-2039495-01	09/09/08	09/09/09	<input checked="" type="checkbox"/> WC STAT-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Seminole County, officials, officers and employees are listed as additional insured with respects to general and auto liability. Insurance is Primary & Non Contributory including Products and Completed Operations. This insurance is in full compliance with the insurance requirements of Chapter 235 Seminole County Code. Umbrella follows forms. *10 days for non pay. *30 days

CERTIFICATE HOLDER <div style="text-align: right;">SEMIN11</div> Seminole County 1101 E. 1st. St. Sanford, FL 32771	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE
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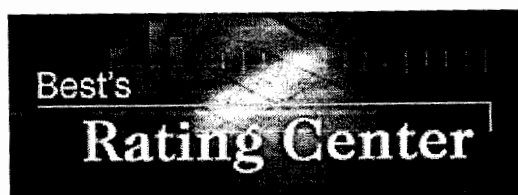
NOTEPAD:

HOLDER CODE SEMIN11
INSURED'S NAME Keller Outdoor, Inc.

KELLE-1
OP ID MY

PAGE 2
DATE 10/17/08

notice for any restriction of the above listed coverages will be applicable.

View Ratings: [Financial Strength](#) [Issuer Credit](#) [Securities](#) [Advanced Search](#)Other Web Centers: [Select Or](#)Search Results Page 1 of 1 Results Per Page

1 Rated or non-Rated companies found, results sorted by Company Name

Criteria Used: NAIC number: 19488

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Company Information

Financial Strength Ratings

Issuer Credit Ratings

AMB#	Company Name	Rating	Outlook / Implication	Long-Term	Outlook / Implication	Short-T
04032	Amerisure Insurance Company (Property/Casualty - Insurance Company)	A	Stable	a	Positive	

Note: Financial Strength Ratings as of 09/25/2008 12:47 PM E.S.T.

† Financial Strength Ratings (FSR) are sometimes assigned to Property/Casualty - A.M. Best Consolidated Groups and Company Consolidated Financial Statements are not assigned.

* Denotes [Under Review Best's Ratings](#)Visit [Best's Rating Center](#) for a complete overview of our rating process and methodologies.

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